

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

1673275

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	12	minus 20 =	0
INDEPENDENT CLAIMS	6	minus 3 =	3
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2.

3-26-01 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	00	0
Independent	3	Minus	00	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM SMALL ENTITY TYPE OR OTHER THAN SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	\$375	OR BASIC FEE	\$750
X\$ 9 =	<input type="checkbox"/>	OR X\$18 =	<input type="checkbox"/>
X42 =	<input type="checkbox"/>	OR X84 =	<input type="checkbox"/>
+140 =	<input type="checkbox"/>	OR +280 =	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	<input type="checkbox"/>

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9 =	<input type="checkbox"/>	OR X\$18 =	<input type="checkbox"/>
X42 =	<input type="checkbox"/>	OR X84 =	<input type="checkbox"/>
+140 =	<input type="checkbox"/>	OR +280 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	OR TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	20	0
Independent	4	Minus	6	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9 =	6	OR X\$18 =	<input type="checkbox"/>
X42 =	0	OR X84 =	<input type="checkbox"/>
+140 =	0	OR +280 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	0	OR TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	00	0
Independent		Minus	00	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9 =	<input type="checkbox"/>	OR X\$18 =	<input type="checkbox"/>
X42 =	<input type="checkbox"/>	OR X84 =	<input type="checkbox"/>
+140 =	<input type="checkbox"/>	OR +280 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	OR TOTAL ADDIT. FEE	<input type="checkbox"/>

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.